



Rec'd PCT/PTO

05 AUG 2005

10/520,000

**DECLARATION FOR UTILITY OR
DESIGN PATENT APPLICATION (37 CFR
1.63)**

- ☐ Declaration submitted w/ initial filing
☒ Declaration submitted after initial filing (37 CFR
1.16(e)) required)

Attorney Docket No.: P-57 MG
First Named Inventor: Gerd Mossakowski
COMPLETE IF KNOWN
Appln. No.: ~~not yet known~~ 10/520,000
Filing date: 1/4/2005
Art Unit: _____
Examiner Name: _____

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter
which is claimed and for which a patent is sought on the invention entitled:

Method for transmitting audio signals according to the prioritizing pixel transmission method

the specification of which ☒ is attached hereto **OR** ☐ was filed on _____ as
United States Application Number or PCT International Application number and was amended on
_____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification,
including and claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability and defined in 37
CFR 1.56, including for continuation-in-part applications, material information which became available
between the filing date of the prior application and the national or PCT international filing date of the
continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign
application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT
international application which designated at least one country other than the United States of America,
listed below and have also identified below, by checking the box, any foreign application for patent,
inventor(s) or plant breeders rights certificate(s), or any PCT international application have a filing date
before than of the application on which priority is claimed.

Prior Foreign Application Numbers.	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached	
				YES	NO
PCT/DE2003/002258	PCT	July 7, 2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
102 30 809.8	Germany	July 8, 2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet.



DECLARATION – Utility or Design Patent Application

Direct all correspondence to	<input checked="" type="checkbox"/> the address associated with Customer No.: <u>28752</u>
	<input checked="" type="checkbox"/> The correspondence address below.
Name: Lackenbach Siegel LLP	
Address: One Chase Road	
City: Scarsdale	State: NY ZIP: 10583
Country: U.S.A.	Telephone: (914) 723 4300 Fax: (914) 723 4301

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and believe are believed to be true; and further that these statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor.
Given name (first/middle): <u>Gerd</u>	Family name/surname: <u>MOSSAKOWSKI</u>
Inventor's signature: <u>Gerd Mossakowski</u>	Date: <u>17.06.05</u>
Residence: Im Klosterskamp 8	
City: <u>D-59227 Ahlen</u>	State: <u>DEX</u> ZIP: Country: <u>Germany</u>
Mailing Address: (same as above)	
City:	State: ZIP: Country:
Country of citizenship: Germany	

NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor.
Given name (first/middle):	Family name/surname:
Inventor's signature:	Date:
Residence:	
City:	State: ZIP: Country:
Mailing Address:	
City:	State: ZIP: Country:
Country of citizenship:	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) attached hereto.	